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## BIB DATA SHEET

CONFIRMATION NO. 1002

<b>SERIAL NUMBER</b> 10/707,003	<b>FILING or 371(c) DATE</b> 10/30/2003 <b>RULE</b>	<b>CLASS</b> 536 <del>435</del> OK. /DS/, 7-15-09	<b>GROUP ART UNIT</b> 1635	<b>ATTORNEY DOCKET NO.</b> 050992.0300.10USCP	
<b>APPLICANTS</b> Itzhak Bentwich, Kfar Daniel, ISRAEL; OK. confirmed by Dana Shin, /DS/, 7-15-09 <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/457,788 03/27/2003 ABN and is a CON of 10/604,984 08/29/2003 and is a CIP of 10/303,778 11/26/2002 ABN and is a CIP of 10/310,188 12/05/2002 ABN and claims benefit of 60/441,241 01/17/2003 and is a CIP of 10/604,945 08/27/2003 * and is a CIP of 10/604,942 08/28/2003 * and is a CIP of 10/604,943 08/28/2003 and is a CIP of 10/604,944 08/28/2003 PAT 7,217,807 and is a CIP of 10/605,838 10/30/2003 ABN and is a CIP of 10/605,840 10/30/2003 ABN (*)Data provided by applicant is not consistent with PTO records. <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 10/19/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and /DANA H SHIN/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWINGS</b> 17	<b>TOTAL CLAIMS</b> <del>20</del> 4	<b>INDEPENDENT CLAIMS</b> <del>3</del> 2
<b>ADDRESS</b> OK. /DS/ OK. /DS/ 7-15-09 7-15-09 ROSETTA-GENOMICS c/o PSWS 700 W. 47TH STREET SUITE 1000 KANSAS CITY, MO 64112 UNITED STATES					
<b>TITLE</b> Amended by Dana Shin, See Examiner's amendment, /DS/ HCMV-related nucleic acids and microRNA. 7-15-09					
<b>FILING FEE RECEIVED</b> 1545	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		